

ANNEXURE 6.1(Ref. Clause 6.4(b))

This form is available free of cost

Format for Application for Advance Payment

To,
The Sr. Manager

Dated:

Reference:

Name of Consumer: _____

Address of the Connection: _____

Connection No.: _____

Consumer Category: _____

Contracted Load: _____

Dear Sir,

I wish to make advance payment for the period from _____
to _____ against above referred connection. You are
requested to kindly send me provisional advance bill for consumption of above period, so
that I can make payment.

Thanking you.

Name, Signature, Address,
Phone No of the Applicant